

CERTIFICATE OF INSURANCE

Name of State Agency and Division

This certificate is issued by the Department of Administration under the authority granted by § 2-9-101, MCA through § 2-9-305, MCA to establish self-insurance plans. This certificate is issued as a matter of information only and confers no rights upon the certificate holder. It does not amend, extend or alter the coverage provided by the self-insurance program.

This is to certify that the State of Montana through the Department of Administration provides the following coverages by Self-Insurance

Kind of Insurance	Effective Date	Limits
Tort Liability (includes auto)	effective date	Per Claim \$ 750,000
		Per Occurr. \$1,500,000
Property	effective date	Per Occurrence \$500,000,000
Automobile Physical Damage	effective date	Comprehensive/Collision ACV less \$250.00

Coverage in accordance with the Tort Claims Act, Title 2, Section 9, Chapters 1-3, Montana Code Annotated for: state employees and state volunteers working in the course and scope of their duties in connection (description of event/operations/locations/vehicles/property) on the above date.

Should any material change occur, the Department of Administration will endeavor to notify the certificate holder of such changes by mail at least thirty (30) days prior to such change, but failure to do so shall impose no obligation or liability of any kind upon the state.

Date Issued:

Name & Address of Certificate Holders

Name
Address
City, State, Zip Code

By: _____
Kristie K. Rhodes, Risk Finance Specialist
State of Montana
Department of Administration